

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece.

Barry Nixon, Lt.  
Autauga County Metro Jail  
136 North Court Street  
Prattville, AL 36067

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*L. McLaughlin*☐ Agent☐ Addressee

B. Received by (Printed Name)

*L. McLaughlin*

C. Date of Delivery

*10-3-06*Delivery address different from item 1? ☐ YesIf Yes, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

7005 1820 0002 3461 0348

Domestic Return Receipt

102595-02